

Asthma attacks and depressive elements; The interpretation of a case study with the use of the biobehavioral model of the "psychosomatic family"

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ABSTRACT

Background

Asthma attacks are not so much correlated to intrafamilial accumulation of stress, as they are connected with the toxic influence of environmental factors creating uncertainty in conjunction with elements of depression. Modern psychological / psychosomatic models in the pathogenesis of asthma attacks are discussed through a case report, with the aim to provide a better approach and treatment to a multi-etiology disease, like asthma.

Case presentation

An 18-year-old teenage girl who suffers from asthma attacks was studied. Through the analysis of the patient's genogram, it is suggested that there are burdening factors on behalf of the family, which seem to be responsible for the appearance and aggravation of her asthma attacks. Paradoxically, the attacks prove to be very efficacious in that they offer a secondary benefit to the patient, namely the establishment of boundaries within the family. Only during these attacks do the parents become interested in her health, assuming a protective role toward their child and temporarily ignoring their own problems and impasses. A type of "asthma game" is created, a "double game", in which the patient takes the role of the family pillar, while at the same time being psychologically weak. Since she is unable to verbalize her despair and psychological fatigue she breaks out in asthma attacks. These attacks function as "inhibited fraction and scream". With the help of psychotherapy, the patient was able to realize the connection between her depressive feelings and the subsequent asthma attacks. She was also relieved from the difficult and weighty role of the "parental child" and was able to set her own personal boundaries. We concluded that a biopsychosocial approach with specific psychological interventions for the patient and her family as well as the recommended medication is essential in order to achieve long term results.

Keywords

asthma, asthmatic crisis, family relations, family therapy, psychotherapy

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INTRODUCTION

Research carried out by Wood and Miller^{1,2,3} indicates that asthma attacks are not caused so much by the development of stress in the family, as they are by the existence of environmental stimuli creating uncertainty in conjunction with elements of depression. The theory of the "asthma game"⁴ describes a type of "double game", in which the patient takes the role of the family pillar, whilst at the same time being psychologically weak. The description "inhibited fraction and scream", made by Gorot⁵ and Sami-Ali⁶, could represent the psychological profile of asthma patients, who live in stressful environments.

More than 6% of children in the United States have been diagnosed with asthma, which demonstrates a 75% increase in recent decades. The causes of asthma are unknown; we know that asthma is definitely familial, due to an interaction between strong genetic and environmental factors.⁷ The significance of emotional factors has been recognized along with the interaction of emotional and biological factors³. Miller and Wood support that there is no evidence for the impact of stress in the pathogenesis and manifestation of asthma. On the contrary, they claim and prove through their research that the effect of depressing elements in the development of asthma is very incriminating.⁸ Moreover, the lack of support by the family combined with the lack of hope and the existence of uncertainty in an environment can all contribute to the increase of asthmatic crises³ (fig.1). The role of "parental child"⁹ was suggested in 1974 by Minuchin, and represents a role that may be correlated to the accumulation of stress in families, due to the increased burden of responsibilities. There is a definite effect that social, physiological and biological factors have in most areas concerning health and illness in general^{8,10} (fig.2), however recent medical studies analyse aspects of medical interest, such as clinical characteristics, spirometric and allergy studies, subsequent exposure to common allergens, crowding in the home, homes with/without convenient ground access (particularly related to cat or dog ownership) and also the educational level of the parents since this is directly related to regular interest in seeking high-level health services in order to explicitly follow treatment instructions.^{11,12}

By studying the various ways that psychosomatic factors affect illness, it has been demonstrated that the family plays a very important and decisive role. The model of Minuchin⁹ for